CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

FILED EFFECTIVE

2012 FEB - 1 PM 4: 23

STATE OF IDAHO

Please type or print legibly.

Instructions are included on pack of application	•
1. The assumed business name which the undersigned use(s) in the transaction of business is:	
2. The true name(s) and <u>business</u> address(es) of the business under the assumed business name: Name Alicia Kroush 6336 Houry M Kroush 6336 Hours	Complete Address
3. The general type of business transacted under the Retail Trade Transportation and Portion Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	
4. The name and address to which future correspondence should be addressed: Alicia Krowh 6336 Hwy 95 Fru: +1 and ID 83619	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgment copy is (if other than # 4 above):	
	Secretary of State use only
Signature: Alicia Kracish	
Printed Name: Alicia Krowh Capacity/Title: Owner	
Signature:	
Printed Name:	
Capacity/Title:	IDAHO SECRETARY OF STATE

IDAHO SECRETARY OF STATE

@2/@2/2012 @5:00

CX: 893204 CT: 172099 BH: 1308623
1 0 25.00 = 25.00 ASSUM MANE # 2